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CONFIRMATION NO. 2683

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|---|---|-------------------------------|---|--|--------------------------------|
| SERIAL NUMBER 10/605,684 | FILING OR 371(c) DATE 10/17/2003 RULE | CLASS 715 | GROUP ART UNIT 2193 | ATTORNEY DOCKET NO. 65,217-003 | |
| APPLICANTS James H. Murray, Bloomfield Hills, MI; Neal Fairbanks, Livonia, MI; | | | | | |
| ** CONTINUING DATA ***** This application is a CIP of 09/630,002 07/31/2000 PAT 6,636,237 <i>NA</i> | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY** <i>NA</i> ** 01/29/2004 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Allowance</i> Examiner's Signature <i>NA</i> Initials | | STATE OR COUNTRY MI | SHEETS DRAWING 9 | TOTAL CLAIMS 34 | INDEPENDENT CLAIMS 3 |
| ADDRESS 27305 | | | | | |
| TITLE METHOD OF RETIEVING INFORMATION ASSOCIATED WITH AN OBJECT PRESENT IN A MEDIA STREAM | | | | | |
| FILING FEE RECEIVED 736 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |